

Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi State Port Authority of Gulfport		CONTACT PERSON Donald R. Allee	TELEPHONE NUMBER 228-865-4300
ADDRESS P.O. Box 40		CITY Gulfport	STATE MS
ZIP 39502			
EMAIL dra@shipmspa.com	SUBMIT DATE 10/17/11	Name or number of rule(s): <u>Section 103, Whistleblower Policy, Mississippi State Port Authority at Gulfport's Operations and Procedures Manual</u>	

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: To further the Port Authority's interests in ensuring that employee's good faith allegations of fraud, abuse, waste and mismanagement of Port Authority resources and funds are reported to the Port Authority and fully, diligently and independently investigated, and further ensuring that any such employees are protected from reprisal, harassment and adverse employment decisions or treatment arising as a result of any such reports.

Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. §§ 59-1-1, 59-1-9 and 59-5-21

List all rules repealed, amended, or suspended by the proposed rule: N/A

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
_____ Original filing _____ Renewal of effectiveness To be in effect in _____ days Effective date: _____ Immediately upon filing _____ Other (specify): _____	Action proposed: <input checked="" type="checkbox"/> New rule(s) _____ Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: _____ 30 days after filing <input checked="" type="checkbox"/> Other (specify): <u>12/12/11</u>	Date Proposed Rule Filed: _____ Action taken: _____ Adopted with no changes in text _____ Adopted with changes _____ Adopted by reference _____ Withdrawn _____ Repeal adopted as proposed Effective date: _____ 30 days after filing _____ Other (specify): _____

Printed name and Title of person authorized to file rules: Donald R. Allee, Executive Director

Signature of person authorized to file rules: *Donald R. Allee*

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
Accepted for filing by		Accepted for filing by

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.